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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	39	Attorney Docket Number	0154.310US
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ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): <input type="checkbox"/> Amendment; and Return Postcard	
<input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Affidavits/declaration(s)			
<input checked="" type="checkbox"/> Extension of Time Request			
<input type="checkbox"/> Express Abandonment Request			
<input type="checkbox"/> Information Disclosure Statement			
<input type="checkbox"/> Certified Copy of Priority Document(s)			
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application			
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53			
	Authorization to Charge Deposit Account Please charge Deposit Account No. 50-0990 for any additional fees associated with this paper or during the pendency of this application, including any extensions of time for consideration of the documents enclosed.		
	Remarks		RECEIVED
			OCT 14 2003

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Margaret A. Powers – Reg. No: 39,804
Signature	
Date	October 1, 2003

TECH CENTER 1600/2900

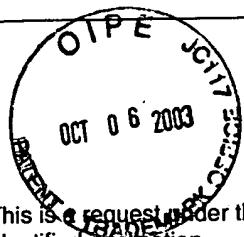
CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the US Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date: October 1, 2003			
Typed or printed name	Diane D. Dunn		
Signature		Date	October 1, 2003

+

PETITION FOR EXTENSION OF TIME UNDER 37 CFR §1.136(a)

Attorney Docket No:

0154.310US



In re Application of: Juha Punnonen, et al.

Application Number: 09/760,388 Filed: January 10, 2001

For: Monocyte-Derived Dendritic Cell Subsets

Group Art Unit: 1644 Examiner: Gerald R. Ewoldt

This is a request under the provisions of 37 CFR §1.136(a) to extend the period for filing a response in the above-identified application.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ 110	OCT 14 2003
<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$ 420	TECH CENTER 1600/2900
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ 950	
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1480	
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2010	

Applicant is a small entity under 37 CFR §1.9 and §1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.

A small entity statement under 37 CFR §1.27:

is enclosed.
 has already been filed in this application.

A check in the amount of the fee is enclosed.
 The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
 The Commissioner is hereby authorized to charge any fees that may be required, or credit any overpayment, to Deposit Account Number 50-0990. I have enclosed a duplicate copy of this sheet.

I am the assignee of record of the entire interest.
 applicant.
 attorney or agent of record.
 attorney or agent under 37 CFR §1.34(a)
Registration number if acting under 37 CFR §1.34(a). _____

10/1/03

Date

Signature

Margaret A. Powers

Typed or printed name and Reg. No. 39,804

10/09/2003 MDANTE1 00000053 500990 09760388

01 FC:1252 420.00 DA

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Diane D. Dunn

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**FEET TRANSMITTAL
for FY 2003**

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 420.00)

Complete if Known

Application Number	09/760,388
Filing Date	January 10, 2001
First Named Inventor	Juha Punnonen, et al.
Examiner Name	Gerald R. Ewoldt
Art Unit	1644
Attorney Docket No.	0154.310US

METHOD OF PAYMENT (check all that apply)
 Check Credit card Money Order Other None
 Deposit Account:

Deposit Account Number

50-0990

Deposit Account Name

Maxygen, Inc.

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEES CALCULATION**1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$)			420

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
41	-20** = 0	X 18 = 0	= 0
Independent Claims 8	- 3** = 0	X 84 = 0	= 0
Multiple Dependent			

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)		0.00

** or number previously paid, if greater. For Reissues, see above

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 410	2252 205	Extension for reply within second month	
1253 930	2253 465	Extension for reply within third month	
1254 1,450	2254 725	Extension for reply within fourth month	
1255 1,970	2255 985	Extension for reply within fifth month	
1401 320	2401 160	Notice of Appeal	
1402 320	2402 160	Filing a brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,300	2453 650	Petition to revive - unintentional	
1501 1,300	2501 650	Utility issue fee (or reissue)	
1502 470	2502 235	Design issue fee	
1503 630	2503 315	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 750	2809 375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 750	2810 375	For each additional invention to be examined (37 CFR 1.129(b))	
1801 750	2801 375	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	
Other fee (specify)			
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$)	420.00

(Complete if applicable)

SUBMITTED BY			
Name (Print/Type)	Margaret A. Powers	Registration No. (Attorney/Agent)	39,804
Signature	<i>Margaret A. Powers</i>		
	Date	10/1/03	

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Typed or Printed Name	Diane D. Dunn		
Signature	<i>Diane D. Dunn</i>		Date
			10/1/03